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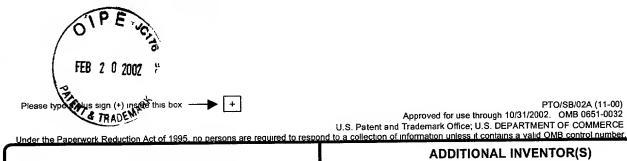
	Eg. at		Attorney Docket Numbe	r GOTZF 131	
DECLARATION FOR UTILITY OR		First Named Inventor	Monse, et al.		
		:SIGN APPLICATION	COMPLETE IF KNOWN		
	(37 CFR 1.63)		Application Number	09 / 995,147	
	Designation	X Declaration	Filing Date	11/27/2001	
	Submitted OR Submitted	Decialation	Art Unit	(Not assigned)	
	with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name	(Not assigned)	

As the below named	inventor, I her	eby declare that:			
My residence, mailing	address, and c	itizenship are as stated belo	w next to my name.		
I believe I am the orig	inal and first inv	entor of the subject matter v	which is claimed and for which	ch a patent is soug	ht on the invention entitled:
ELECTRICAL DRIVE SYSTEM WITH INTERCOMMUNICATION-NETWORKS AND MULTI-LINK-CONTROLLER COPY OF PAPERS ORIGINALLY FILED					
		(Title of the l	nvention)		
the specification of w	hich				
is attached her	reto				
OR X was filed on (M	M/DD/YYYY)	11/27/2001	as United States A	pplication Number	or PCT International
Application Number	09/995,147	and was amend	ed on (MM/DD/YYYY)		(if applicable).
any amendment spec	ifically referred t				
applications, material	information which	ormation which is material to ch became available betwee ation-in-part application.	o patentability as defined in en the filing date of the prior	application and the	ding for continuation-in-part e national or PCT
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s) Prior Foreign Filing Date Number(s) Foreign Filing Date (MM/DD/YYYY) Not Clalmed YES NO					Certified Copy Attached? YES NO
-					
Additional foreig	gn application n	umbers are listed on a supp	lemental priority data sheet	PTO/SB/02B attac	hed hereto:

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numbe or Bar Code Labe	1 102555	OR X Con	respondence address below		
Frank H. Foster					
Name KREMBLAS, FOSTER, PHILLIPS & P	OLLICK				
Address 7632 Slate Ridge Blvd.			T		
City Reynoidsburg	s	tate Ohio	ZIP 43068		
Country USA Tele	ephone 614/575-2	100	Fax 614/575-2149		
I hereby declare that all statements made herein of my or are believed to be true; and further that these statement made are punishable by fine or imprisonment, or both, ur validity of the application or any patent issued thereon.	s were made with the	e knowledge that willful false	statements and the like so		
NAME OF SOLE OR FIRST INVENTOR :	A petition has	been filed for this unsign	ned inventor		
Given Name (first and middle [if any]) Mathias		amily Name Monse			
Inventor's 170/CCiOs Mo	un		Date 83.01.200)		
Residence: City Nürnberg	State	Country Germany	Citizenship German		
Residence. City Numberg	State	Country Germany	Citizenship German		
Mailing Address Blütenstrasse 23					
City Nürnberg	State	ZIP 90480	Country Germany		
NAME OF SECOND INVENTOR:	A petition has b	een filed for this unsigne	d inventor		
Given Name (first and middle [if any]) Harald	1	amily Name Mainka			
73	1 4	Ourname			
Inventor's Signature Kavald Mankq			Date 9.1.2002		
Residence: City Erlangen	State	Country Germany	Citizenship German		
Mailing Address Am Brucker Bahnhof 25					
	T				
City Erlangen	State	ZIP 91052	Country Germany		
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1__ of 1__

		JPY OF BA	DF An			
	o r	HOINALLY	FUERS			
Name of Additional Joint Inventor, if an	y:		FILED A petition has bee	n filed for thi	s unsigned inventor	
Given Name (first and middle [if any])		Family	Name or Su	mame	
Harold ,			Meis			
Inventor's Signature				Date 9/01/02		
Residence: City Burgthann/Mimberg	State	C	ountry Germany	С	itizenship German	
Mailing Address Pfeifferhütter Weg 24			-			
Mailing Address						
City Burgthann/Mimberg	State		zip 90559	Country	Germany	
Name of Additional Joint Inventor, if an	y:		petition has been	filed for this	unsigned inventor	
Given Name (first and middle [if any])		Family	Name or Su	mame	
Inventor's Signature					Date	
Residence: City	State	С	Country Citizenship			
Mailing Address						
Mailing Address						
City	State		ZIP	Cour	ntry	
Name of Additional Joint Inventor, if a	ny:	□ A	petition has been	filed for this	unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname			
Inventor's Signature					Date	
Residence: City	State		Country		Citizenship	
Mailing Address		•				
Mailing Address						
City	State		ZIP	Co	ountry	

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Application Number	09/995,147
Filing Date	11/27/2001
First Named Inventor	Monse, et al.
ELECTRICAL DRIVE Title NETWORKS AND MU	SYSTEM WITH INTERCOMMUNICATION- ILTI-LINK-CONTROLLER
Group Art Unit	(not assigned)
Examiner Name	(not assigned)
Attorney Docket Number	GOTZF 131

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		emblas, Jr.	2	2,773		
	ck P. Phi			9,690		
Jaso	n H. Fos	ter	3	9,981		
		agent(s) to prosecute the applicatio				act all
The above-r OR Practitioners OR	mention	spondence address for the above-id ed Customer Number. tomer Number	entified	PI.	0: lace Custome umber Bar Co abel here	
x Firm or Individual Nar	ne	Frank H. Foster				
Address		KREMBLAS, FOSTER, PHILLIPS &	POLLICE	(
Address		7632 Slate Ridge Blvd.				
City		Reynoldsburg	State	Ohio	Zip	43068
Country		USA				
Telephone		614/575-2100	Fax	614/575-2	2149	
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name	Mathia	as Monse, Inventor				
Signature Mafleries it ourse						
Date (29.01, 2002						
NOTE: Signatures of all forms if more than one s		tors or assignees of record of the entire inter	est or thei	representative	e(s) are requi	ired. Submit multiple
☑ *Total of1		ms are submitted.				

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Application Number	09/995,147
Filing Date	11/27/2001
First Named Inventor	Monse, et al.
ELECTRICAL DRIVE TITLE NETWORKS AND MU	SYSTEM WITH INTERCOMMUNICATION- LTI-LINK-CONTROLLER
Group Art Unit	(not assigned)
Examiner Name	(not assigned)
Attorney Docket Number	GOTZF 131

Practitioners at Customer Number 02555	I hereby appoi	nt:						
Practitioner(s) named below: Name		ers at C	customer Number [02555			Number Bar	
Name		er(s) na	med below:					
Frank H. Foster Francis T. Kremblas, Jr. Patrick P. Phillips Jason H. Foster as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Please Customer Number Place Customer Number Bar Code Label here KREMBLAS, FOSTER, PHILLIPS & POLLICK Address KREMBLAS, FOSTER, PHILLIPS & POLLICK Address KREMBLAS, FOSTER, PHILLIPS & Ohio Zip 43068 Country USA Telephone 614/575-2100 Fax 614/575-2149 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Place Customer Number Bar Code Label here Address Applicant/Inventor. Signature Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Name Harald Meinka, Inventor or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	i i douton	or(o) na				Registration	n Number	
Patrick P. Phillips Jason H. Foster as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Practitioners at Customer Number. Practitioners at Customer Number	Fran	ık H. Fos			2			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to:	Fran	icis T. Kr	emblas, Jr.		2	2,773		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer Number Place Customer Number Bar Code	Patri	ck P. Ph	illips		29	9,690		
business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number.	Jaso	n H. Fos	ter		3	9,981		
The above-mentioned Customer Number. OR Practitioners at Customer Number Frank H. Foster Address KREMBLAS, FOSTER, PHILLIPS & POLLICK Address City Reynoldsburg State Country USA Telephone 614/575-2100 Fax 614/575-2149 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Januard Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	business in the l	Jnited S	tates Patent and Trad	emark Office co	nnecte	d therewith.		t all
Address KREMBLAS, FOSTER, PHILLIPS & POLLICK Address 7632 Slate Ridge Blvd. City Reynoldsburg State Ohio Zip 43068 Country USA Telephone 614/575-2100 Fax 614/575-2149 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Harald Mainka, Inventor Signature Gall the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	The above-ORPractitioners	mention	ed Customer Number.		ntified a	Plac Num	e Customer nber Bar Code	,
Address 7632 Slate Ridge Blvd. City Reynoldsburg State Ohio Zip 43068 Country USA Telephone 614/575-2100 Fax 614/575-2149 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Harald Mainka Inventor Signature 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	I V I	me	Frank H. Foster		_			
City Reynoldsburg State Ohio Zip 43068 Country USA Telephone 614/575-2100 Fax 614/575-2149 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Yarald Mcwila Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address		KREMBLAS, FOSTE	R, PHILLIPS & P	OLLICK			
Telephone 614/575-2100 Fax 614/575-2149 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Harald Mainka, Inventor Signature Jacaba Maula Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address			rd.				
Telephone 614/575-2100 Fax 614/575-2149 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Harald Mainka, Inventor Onte 9. 1. 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	City		Reynoldsburg		State	Ohio	Zip	43068
I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Harald Mainka, Inventor Signature Janald Mainka Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Country		USA					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Harald Mainka, Inventor Signature Harald Mainka, Inventor Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Telephone		614/575-2100		Fax	614/575-21	49	
Name Harald Mainka, Inventor Signature Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	X Applicant	of reco	rd of the entire interes			/96).		
Signature Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	··		SIGNATURE of Ap	plicant or Assig	nee of	Record		
Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Haral	d Mainka, Inventor					
Date 9.1.2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Signature Harald Marile							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Date 9. 1. 2002							
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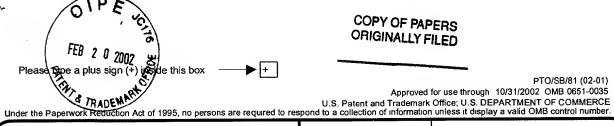
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Application Number	09/995,147				
Filing Date	11/27/2001				
First Named Inventor	Monse, et al.				
ELECTRICAL DRIVE Title NETWORKS AND MU	SYSTEM WITH INTERCOMMUNICATION- ILTI-LINK-CONTROLLER				
Group Art Unit	(not assigned)				
Examiner Name	(not assigned)				
Attorney Docket Number	GOTZF 131				

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OR						Label her	Э	
X Prag	ctitioner(s) nai	med below:		,			·	
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	Frank H. Fos	ter		24,560				
	Francis T. Kr	emblas, Jr.		22,773				
	Patrick P. Ph	illips			29,690			
	Jason H. Fos	ster		39	39,981			
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Address		KREMBLAS, FOS	TER, PHILLIPS & P	OLLICK				
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I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
SIGNATURE of Applicant or Assignee of Record								
Name	Harol	d Meis, Inventor						
Signature	1/1/2.5							
Date 9/01/02								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
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Application Number	09/995,147
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ELECTRICAL DRIVE	SYSTEM WITH INTERCOMMUNICATION- LTI-LINK-CONTROLLER
Group Art Unit	(not assigned)
Examiner Name	(not assigned)
Attorney Docket Number	GOTZF 131

I hereby ap	opoint:				ſ			
Practitioners at Customer Number 02555						Customer er Bar Coo here		
× Practitioner(s) named below:								
		Name			Registra	tion Nun	nber	
	Frank H. Fos			24	24,560			
	Francis T. Kı	emblas, Jr.		22	22,773			
F	Patrick P. Ph	illips		29	29,690			
	Jason H. Fo	ster		39	39,981			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
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x Firm or Individua	I Name	Frank H. Foster						
Address		KREMBLAS, FOS	TER, PHILLIPS & P	OLLICK				
Address		7632 Slate Ridge	Blvd.				<u>-</u>	
City	· "	Reynoldsburg		State	Ohio	Z	ip 430	68
Country		USA						
Telephone		614/575-2100		Fax	614/575	-2149		
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO)SB/96).								
		SIGNATURE of	Applicant or Assig	nee of i	Record			
Name	He	Blinger Ho	ubut	/vol 1				
Signature		01.410.2		AN	ngh	_ /		
Date		10/1/02	1					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
⊠ *Total of 1	 	rms are submitted.						

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